# P08000010705

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PICK-UP WAIT MAIL				
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### **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Herit	age SpiritWeare, Inc.	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	✓ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: G	ary F. Ritter, Esq.	(Printed or typed)	· · · · · · · · · · · · · · · · · · ·
	24341 Copperleaf Bou	<b>,</b> ,	<del></del>
	Bonita Springs, Florida	a 34135 , State & Zip	
	239 390-0081	Celephone number	

NOTE: Please provide the original and one copy of the articles.

#### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

Heritage SpiritWeare, Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 27844 Lance Drive Bonita Springs, Florida 34135

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Production of clothing and other merchandise for wholesale and retail sales.

#### ARTICLE IV SHARES

The number of shares of stock is: 500

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

James S. Lesure 27844 Lance Drive Bonita Springs, Florida 34135 President, Treasurer, Secretary

## FILED

2008 JAN 28 A 7 28

SECRETARY OF STATE TALLAHASSEE, FLORIDA ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Gary F. Ritter

24341 Copperleaf Boulevard Bonita Springs, Florida 34135

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Gary F. Ritter 24341 Copperleaf Boulevard Bonita Springs, Florida 34135

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and occupt the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent 6 Aly Fill Ther

Signature/Incorporator

GAMY F. LITTER

FILED

1008 JAN 28 A 7 28
SECRETARY OF STATE
SECRETARSSEE. FLORID.